BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998													
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ALL PE	ENTITY	OR	OTHER SMALL	
FC	OR 	1	NUMBER FILED			NUMBER EXTRA		RA	TE	FEE	1	RATE	FEE
BA	SIC FEE									380.00	OR		760.00
TC	TAL CLAIMS		30 minus 2		20=	. 1)	X\$	9=		OR	X\$18=	180
INDEPENDENT CLAIMS			minus 3		3 =	* 4		ХЗ	9=		OR	X78=	112
MULTIPLE DEPENDENT CLAIM PRESENT								+13	+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2									TAL.		OR	TOTAL	452
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA	SMALL ENTITY OR			OTHER THAN SMALL ENTITY		
AMENDMENT A	en transport	CLA REMA AFT AMEND	IMS INING ER		Pi	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=	X\$	9=		OR	X\$18=	
	Independent			Minus	**		=	X39	9=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								0=		OR	+260=	
									TAL FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)									FEE		4 ′	ADDII. FEE	
AMENDMENT B	***	CLAI REMAI AFT AMEND	INING ER		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=	X\$:	9=		OR	X\$18=	
	Independent	*		Minus		*	=	X39)=			X78=	
	FIRST PRESE	NTATION	OF MU	ILTIPLE DE	PENE	ENT CLAIM					OR		
<u>[+ </u>										,	OR	+260=	
م									TAL FEE		OR ,	TOTAL ADDIT. FEE	
		(Colun				olumn 2)	(Column 3)	_					
MEN		CLAI REMAI AFTI AMEND	NING ER		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	·	Minus	**		= .	X\$ 9	=		OR	X\$18=	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Independent	*		Minus **			=	X39			ŀ	X78=	
	FIRST PRESE	NTATION	OF MU	LTIPLE DEF	END	ENT CLAIM		700	\dashv		OR	X/0=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR [+260=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR											OR A	TOTAL DDIT. FEE	
T	he "Highest Num	ber Previo	usly Paid	ic For IN IHI	Indep	endent) is the	i 3, enter "3." highest number (ropriate box			